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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	oint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Michelle First name M Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Safford Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	,		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6357		

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Page 2 of 68 Case number (if known) Debtor 1 Michelle M Safford

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1948 Oak St. Apt. 2E Blue Island, IL 60406	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Michelle M Safford Page 3 of 68

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form		rief description of each, see a go to the top of page 1 and c				luals Filing for Bankruptcy
		☐ Ch	apter 11					
			apter 12					
		■ Ch	apter 13					
В.	How you will pay the fee	;	about how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself	, you may pay with cas	h, cashier's check, or money
				the fee in installments. If y		e this option, sig	gn and attach the Applic	cation for Individuals to Pay
		The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing but is not required to, waive your fee, and may do so only if your income is less that that applies to your family size and you are unable to pay the fee in installments). I out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) at the No. ☐ No.		if you are filing for Cha	pter 7. By law, a judge may,			
		1	that applies to	your family size and you are	unable t	o pay the fee in	installments). If you cho	oose this option, you must fil
).	Have you filed for bankruptcy within the	□ No.						
	last 8 years?	Yes	S.					
			District	Northern District of IL - Ch 7	When	11/10/12	Case number	12-44650
			District	- Cn 7	When	11/10/12	Case number	12 44000
			District		When		Case number	
0.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	5.					
			Debtor				Relationship to	/ou
			District		When		Case number, if	known
			Debtor	-			Relationship to	-
			District		_ When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
	residence :	☐ Yes	s. Has yo	ur landlord obtained an eviction	on judgm	ent against you	and do you want to stay	in your residence?
				No. Go to line 12.				
								101A) and file it with this

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Case 15-42901 Desc Main Document Page 4 of 68 Case number (if known) Michelle M Safford Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Michelle M Safford Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not i	required to	receive a	briefing	about	credit
counselir	ng because	of·			

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

My physical disability causes me to Disability. be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dec	Michelle M Saffor	d		Case number	er (if known)
Par	6: Answer These Questi	ons for Repo	rting Purposes		
16.	What kind of debts do you have?	ind	dividual primarily for a perso	nsumer debts? Consumer debts are definal, family, or household purpose."	Business debts are debts that you incurred to obtain gh the operation of the business or investment. consumer debts or business debts that after any exempt property is excluded and administrative e to distribute to unsecured creditors? 5,000
			No. Go to line 16b.		
			Yes. Go to line 17.		
					bts are debts that you incurred to obtain ion of the business or investment. bts or business debts y exempt property is excluded and administrative to unsecured creditors? 25,001-50,000 50,001-100,000 More than100,000 More than100,000 million \$1,000,000,001 - \$1 billion million \$1,000,000,001 - \$50 billion million More than \$50 billion million \$1,000,000,001 - \$1 billion million \$1,000,000,001 - \$1 billion million \$1,000,000,001 - \$1 billion million More than \$50 billion million More than \$50 billion million More than \$50 billion that the information provided is true and correct. seed, if eligible, under Chapter 7, 11,12, or 13 of title 11, apter, and I choose to proceed under Chapter 7.
			No. Go to line 16c.		
			Yes. Go to line 17.		
		16c. St	ate the type of debts you ov	ve that are not consumer debts or busine	ss debts
17.	Are you filing under Chapter 7?	■ No. I a	m not filing under Chapter 7	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and			o you estimate that after any exempt prop will be available to distribute to unsecured	ebts are debts that you incurred to obtain tion of the business or investment. ebts or business debts ay exempt property is excluded and administrative e to unsecured creditors? 25,001-50,000
	administrative expenses		No		
	are paid that funds will be available for distribution to unsecured		Yes		
	creditors?				
18.	How many Creditors do	1 -49		□ 1,000-5,000	2 5,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$0 - \$50,	000	□ \$1,000,001 - \$10 million	
	estimate your assets to be worth?	\$50,001 -		☐ \$10,000,001 - \$50 million	
		□ \$100,001 □ \$500,001		□ \$100,000,001 - \$100 million	
20.	How much do you estimate your liabilities	□ \$0 - \$50,0		☐ \$1,000,001 - \$10 million	
	to be?	■ \$50,001 □ \$100,001	- \$100,000 \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	
		☐ \$100,001 ☐ \$500,001		□ \$100,000,001 - \$500 million	ty is excluded and administrative reditors? 25,001-50,000
Par	7: Sign Below				
For	you	I have exam	ned this petition, and I decl	are under penalty of perjury that the infor	mation provided is true and correct.
				ot pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request reli	ef in accordance with the ch	napter of title 11, United States Code, spe	ecified in this petition.
		bankruptcy of 1519, and 35	ase can result in fines up to 571.		
		/s/ Michelle M Michelle M Signature of		Signature of Debto	or 2
		Executed on		Executed on	
			MM / DD / YYYY	MM	I / DD / YYYY

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Debtor 1 Michelle M Safford Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kerrie S	S. Neal	Date	December 9, 2015
Signature of	Attorney for Debtor		MM / DD / YYYY
Kerrie S. N	leal		
Zalutsky 8	Pinski, Ltd.		
111 W. Wa Suite 1550	_		
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-782-9792	Email address	admin@ZAPLawFirm.com
6270224			
Bar number & St	ato		

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entify your case:		

FIII III UIIS IIIIOI	mation to identify your	case.		
Debtor 1	Michelle M Saffor	rd		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is a
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,347.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	18,347.00
Par	t 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,335.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	170.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,136.45
	Your total liabilities	\$	54,641.45
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,094.61
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,523.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of	our other	schedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$_	4,404.51
		1	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	170.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,844.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,014.00

Case 15-42901 Doc 1 Filed 12/21/15 Entered 12/21/15 16:54:07 Desc Main Page 10 of 68 Document Fill in this information to identify your case and this filing: Debtor 1 Michelle M Safford Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse, if filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put **Toyota** Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: Camry Model ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2008 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 94000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another V6 Sedan 4Dr SE \$11,025.00 \$11,025.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11.025.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property page 1

Case 15-42901 Doc 1 Filed 12/21/15 Entered 12/21/15 16:54:07 Desc Main Document Page 11 of 68 Debtor 1 Case number (if known) Michelle M Safford Yes. Describe.... 4 Standard Rooms of Furniture; Miscellaneous Household Goods \$1,000.00 & Furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$200.00 Standard Electronics Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... \$150.00 Miscellaneous Books & Photos 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe.... \$700.00 Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$250.00 Miscellaneous Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,300.00 for Part 3. Write that number here **Describe Your Financial Assets** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions.

Debtor 1	Michelle M Safford	Docu	ıment	Page 1	12 of $68_{_{ m C}}$	ase number <i>(if kn</i>	own)	
☐ No	pples: Money you have in yo				nd on hand w	hen you file your	petition	
						Cash		\$20.00
Exam _l □ No	sits of money ples: Checking, savings, or institutions. If you have	r other financial accounts ve multiple accounts with		stitution, list		edit unions, broke	rage houses, and	d other similar
	17.1.	Checking Account	Fifth Thi	rd Bank				\$2.00
<i>Exam</i> ■ No	s, mutual funds, or public ples: Bond funds, investme		,	oney market	t accounts			
and jo ■ No	publicly traded stock and pint venture . Give specific information		d and uning	corporated	businesses	, including an in	terest in an LLC	, partnership,
		ne of entity:			C	% of ownership:		
Negot Non-n ■ No	rnment and corporate bor tiable instruments include p negotiable instruments are to dive specific information a lssu	ersonal checks, cashiers those you cannot transfer	checks, pro	omissory no	otes, and mor	ney orders.		
	ment or pension account pples: Interests in IRA, ERIS), thrift savin	gs accounts	s, or other pe	ension or profit-sh	aring plans	
■ Yes.	List each account separat Type o 401(k	of account:	Institution Bank	name:				\$2,500.00
Your s Exam	ity deposits and prepaym share of all unused deposit uples: Agreements with land	s you have made so that					ompanies, or othe	ers
■ No □ Yes.			Institution	name or ind	dividual:			
_	ties (A contract for a period	dic payment of money to	you, either fo	or life or for	a number of	years)		
■ No □ Yes.	lssuer nam	e and description.						
	sts in an education IRA, ir .C. §§ 530(b)(1), 529A(b), a		ed ABLE pı	ogram, or u	under a qua	lified state tuitio	on program.	
	Institution n	ame and description. Se	parately file	the records	of any intere	sts.11 U.S.C. § 5	21(c):	
■ No	s, equitable or future intel		than anythi	ng listed in	n line 1), and	l rights or power	s exercisable fo	r your benefit

page 3

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De	ebtor 1	Michelle M Safford				ase number (if known)	
	Exam _l ■ No	ts, copyrights, trademarks, ples: Internet domain names, Give specific information ab	websites,	proceeds from royalties a		ts	
	Exam _l ■ No	ses, franchises, and other g ples: Building permits, exclus Give specific information ab	ive license	s, cooperative association	n holdings, liquor licens	es, professional licens	ses
		·	out thom.	•			
Mc	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you					
	□ No	•					
	Yes.	Give specific information about	out them, i	ncluding whether you alrea	ady filed the returns an	d the tax years	
			Est	imated 2015 Tax Refu	ınd, not vet filed	Federal	\$2,500.00
					, ,		
		/ support <i>ples:</i> Past due or lump sum a	ılimony, sp	ousal support, child suppo	ort, maintenance, divord	ce settlement, propert	y settlement
	☐ Yes.	Give specific information					
	Exam _i ■ No	amounts someone owes your ples: Unpaid wages, disability benefits; unpaid loans your Give specific information	/ insurance		efits, sick pay, vacation	pay, workers' compe	ensation, Social Security
31.		sts in insurance policies ples: Health, disability, or life	insurance;	health savings account (I	HSA); credit, homeown	er's, or renter's insura	ince
	■ No						
	☐ Yes.	Name the insurance compar Comp	ny of each any name:		Beneficiary	<i>r</i> :	Surrender or refund value:
	If you	terest in property that is duare the beneficiary of a living one has died.				currently entitled to rec	ceive property because
	☐ Yes.	Give specific information					
		s against third parties, whe ples: Accidents, employment				or payment	
	☐ Yes.	Describe each claim					
	Other No	contingent and unliquidate	d claims o	of every nature, including	g counterclaims of the	e debtor and rights t	o set off claims
		Describe each claim					
		nancial assets you did not a	already lis	t			
	■ No	Ohan amasifis to facility					
	⊔ Yes.	Give specific information					
36		the dollar value of all of you art 4. Write that number he					\$5,022.00

Debt	or 1	Michelle M Safford	Docume	:nt 	Page 14 of	Case number (if known)	
37. D o	o you o	wn or have any legal or equitable inter	est in any business-re	elated pr	operty?		
	No. Go	to Part 6.					
	Yes. G	o to line 38.					
Part 6	E Des	scribe Any Farm- and Commercial Fish	ing-Related Property	You Ow	n or Have an Interes	t In.	
	If yo	ou own or have an interest in farmland, lis	t it in Part 1.				
_		own or have any legal or equitab	le interest in any fa	arm- or	commercial fishi	ng-related property?	
	No.	Go to Part 7.					
[☐ Yes.	Go to line 47.					
							Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 7	: Des	scribe All Property You Own or Have a	n Interest in That You	Did Not	List Above		
E	Examp No	have other property of any kind y les: Season tickets, country club m		list?			
54.	Add t	ne dollar value of all of your entri	es from Part 7. Wri	te that	number here		\$0.00
Part 8	B: Lis	the Totals of Each Part of this Form					
55.	Part 1	: Total real estate, line 2					\$0.00
56.	Part 2	: Total vehicles, line 5			\$11,025.00		· ·
57.	Part 3	: Total personal and household i	tems, line 15		\$2,300.00		
		: Total financial assets, line 36			\$5,022.00		
59.	Part 5	: Total business-related property	, line 45		\$0.00		
60.	Part 6	: Total farm- and fishing-related (property, line 52		\$0.00		
		: Total other property not listed,	•	+ _	\$0.00		
62.	Total	personal property. Add lines 56 th	rough 61	_	\$18,347.00	Copy personal property total	\$18,347.00
63.	Total	of all property on Schedule A/B.	Add line 55 + line 62	!			\$18,347.00

Official Form 106A/B Schedule A/B: Property page 5

Page 15 of 68 Document Fill in this information to identify your case: Debtor 1 Michelle M Safford Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2008 Toyota Camry 94000 miles V6 Sedan 4Dr SE	\$11,025.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
4 Standard Rooms of Furniture; Miscellaneous Household Goods &	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Furnishings Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Standard Electronics Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Books & Photos Line from Schedule A/B: 8.1	\$150.00			735 ILCS 5/12-1001(a)
Line from Scriedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing	\$700.00			735 ILCS 5/12-1001(a)
Line from Schedule A/B: 11.1				

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Michelle M Safford Page 16 of 68

Case number (if known)

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Schedule A/B Check only one box for each exemption. Miscellaneous Jewelry 735 ILCS 5/12-1001(b) \$250.00 \$250.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking Account: Fifth Third Bank** 735 ILCS 5/12-1001(b) \$2.00 \$2.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): Bank 735 ILCS 5/12-1006 \$2,500.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: Estimated 2015 Tax Refund, 735 ILCS 5/12-1001(b) \$2,500.00 \$2,500.00 not yet filed 100% of fair market value, up to Line from Schedule A/B: 28.1 any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

		Document	Page 17	of 68	_	
Fill in this information	n to identify you	r case:				
Debtor 1 Mi	chelle M Saffo	ord				
	t Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) Firs	t Name	Middle Name	Last Name			
United States Bankrupt	tcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case number						if this is an ded filing
Official Form 10	6D					
		Who Have Claims	Socured	by Proporty	. 1	12/15
Be as complete and accurneeded, copy the Addition known). I. Do any creditors have c	rate as possible. If all Page, fill it out, claims secured by poox and submit the	two married people are filing togethe number the entries, and attach it to t your property? his form to the court with your other	er, both are equal this form. On the	lly responsible for supp top of any additional pa	olying correct information ages, write your name and	
Part 1: List All Sec	ured Claims					
2. List all secured claims each claim. If more than o	. If a creditor has m	ore than one secured claim, list the crearticular claim, list the other creditors in er according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Go Financial		Describe the property that secures	the claim:	\$16,335.00	\$11,025.00	\$5,310.00
Creditor's Name		2008 Toyota Camry 94000 n V6 Sedan 4Dr SE	niles	· · · · · · · · · · · · · · · · · · ·		·
7465 E Hampto Mesa, AZ 8520		As of the date you file, the claim is: apply.	Check all that			
Number, Street, City, St	tate & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt? CI	heck one.	Nature of lien. Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as car loan)	mortgage or secur	red		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debt	ors and another	☐ Judgment lien from a lawsuit	•			
☐ Check if this claim rel community debt	ates to a	Other (including a right to offset)	Lien on Vehicle/Pl	MSI		
Date debt was incurred	1/17/15	Last 4 digits of account num	ber 6301			
2.2 Go Financial		Describe the property that secures	the claim:	\$0.00	\$0.00	\$0.00
Creditor's Name		Notice				
Do Doy 52007		As of the date you file, the claim is:	Check all that			
Po Box 53087 Phoenix, AZ 85	5072	apply.				
		Contingent				
Number, Street, City, S		☐ Unliquidated ☐ Disputed				
Who owes the debt? Cl	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or secur	red		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	•	Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debt	ors and another	☐ Judgment lien from a lawsuit				

community debt

☐ Check if this claim relates to a

☐ Other (including a right to offset)

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Debtor 1 Michelle	M Safford		Case number (if know)
First Name	Middle Name	Last Name	
Date debt was incurre	Opened 1/01/15 Last Active d 10/28/15	Last 4 digits of account number	
Date dest was incurre	10/20/13		
If this is the last page Write that number he	e of your form, add the do ere:	A on this page. Write that number here: ollar value totals from all pages. sebt That You Already Listed	\$16,335.00 \$16,335.00
to collect from you for	a debt you owe to someo debts that you listed in Pa	ne else, list the creditor in Part 1, and then lis	already listed in Part 1. For example, if a collection agency is trying to the collection agency here. Similarly, if you have more than one lo not have additional persons to be notified for any debts in Part 1,
Name Addre	SS	On which li	ne in Part 1 did you enter the creditor?
		Last 4 digit	s of account number

Case 15-42901 Doc 1 Filed 12/21/15 Entered 12/21/15 16:54:07 Desc Main Page 19 of 68 Document Fill in this information to identify your case: Debtor 1 Michelle M Safford Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 \$0.00 **IRS** 170.00 170.00 Last 4 digits of account number Priority Creditor's Name 2014 P.O. Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed ☐ At least one of the debtors and another Type of PRIORITY unsecured claim: ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Domestic support obligations No Taxes and certain other debts you owe the government ☐ Yes ☐ Claims for death or personal injury while you were intoxicated Other. Specify Taxes

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 Michelle M Safford Document Page 20 of 68
Case number (if know)

4.1	Acs/barclays Bank Plc	Last 4 digits of account number	8801	\$ 0.00
	Priority Creditor's Name 745 Seventh Avanue	When was the debt incurred?	Opened 2/01/07	
	New York, NY 10019 Number Street City State Zlp Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	□ 11=8===3======		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
	00	Notice	9	
4.2	Ai		0044	 0.00
7.2	Amerimark Premier Priority Creditor's Name	Last 4 digits of account number	204A	\$ 0.00
	1515 S 21st St Clinton, IA 52732	When was the debt incurred?	Opened 2/01/12 Last Active 4/16/12	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Occasion ment		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice	•	
4.3	Blue Island Clinic Company LLC	Last 4 digits of account number		\$ 308.00
	Priority Creditor's Name PO BOX 14000	When was the debt incurred?		
	Rumber Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medic	al	

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Debtor 1 Michelle M Safford

4.4	Capital One	Last 4 digits of account number	0813	\$ 620.00
	Priority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 6/01/13 Last Active 9/26/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit	Card	
4.5	City Of Calumet City	Last 4 digits of account number	6030	\$ 0.00
	Priority Creditor's Name Municollofam 3348 Ridge Road Lansing, IL 60438	When was the debt incurred?	Last Active 11/10/12	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 1 only Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Notice	•	
4.6	City of Chicago	Last 4 digits of account number		\$ 244.00
	Priority Creditor's Name Department of Revenue 121 N. LaSalle St. Rm. 107A	When was the debt incurred?		
	Chicago, IL 60602 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	

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Debtor	1 Michelle M Safford			Case number (if know)			
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only						
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured	I claim:			
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising ou		ration agreement or divorce that you did			
	No	Debts to pension or p	rofit-sharin	g plans, and other similar debts			
	Yes	Other. Specify	Ticket	s			
4.7	ComEd	Last 4 digits of account	number	3538	\$		0.00
	Priority Creditor's Name 3 Lincoln Center Attn: Bkcy Group-Claims Department	When was the debt incu					
	Oakbrook Terrace, IL 60181 Number Street City State Zlp Code	As of the date you file, t	the claim is	s: Check all that apply			
	Who incurred the debt? Check one.	_		,			
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured	I claim:			
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising ou not report as priority clain					
	■ No	Debts to pension or p					
	Yes	Other. Specify					
4.8	Comenity Bank/Value City Furniture	Last 4 digits of account	number	7119	\$;	0.00
	Priority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incu	ırred?	Opened 1/21/06 Last Active 12/04/06			
•	Number Street City State Zlp Code	As of the date you file, t	the claim is	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	— Contingont					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured	I claim:			
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	Obligations arising ou not report as priority clain		ration agreement or divorce that you did			
	■ No	☐ Debts to pension or p	rofit-sharin	g plans, and other similar debts			
	Yes	Other. Specify	Notice	•			

4.9 Credit Acceptance
Priority Creditor's Name

Last 4 digits of account number

3,669.00

2575

Document Page 23 of 68 Debtor 1 Michelle M Safford Case number (if know) 25505 West 12 Mile Rd Opened 5/01/13 Last **Suite 3000** When was the debt incurred? Active 8/28/15 Southfield, MI 48034 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Automobile** Other. Specify 4.10 0.00 Dentalworks Inc 5581 Last 4 digits of account number Priority Creditor's Name Opened 8/01/13 Last Cds/Escallate LLC 5200 Stoneham Rd Ste 200 When was the debt incurred? Active 11/18/13 North Canton, OH 44720 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Notice Other, Specify 1,000.00 **Devry Inc** 3570 Last 4 digits of account number \$

4.11

Priority Creditor's Name

Attention: Student Accounts Center

814 Commerce Drive Oakbrook, IL 60523

Number Street City State Zlp Code

When was the debt incurred?

Opened 11/01/12 Last

Active 10/31/15

As of the date you file, the claim is: Check all that apply

Debtor	1 Michelle M Safford	Document Page	e 24 of 68 Case number (if know)	
	Who incurred the debt? Check one.		· · · · · ·	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sep not report as priority claims	varation agreement or divorce that you did	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify	ational	
4.12	Devry University	Last 4 digits of account number	9741	\$ 3,700.00
	Priority Creditor's Name 814 Commerce Dr.	When was the debt incurred?	2014	
	Oak Brook, IL 60523 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.		,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	paration agreement or divorce that you did	
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	Other. Specify	on	
4.13	Fed Loan Servicing	Last 4 digits of account number	0007	\$ 2,293.00
	Priority Creditor's Name			 <u> </u>
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 5/01/14 Last Active 11/30/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	·		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	paration agreement or divorce that you did	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	☐Yes	☐ Other. Specify		
			ational	
4.14	Fed Loan Servicing	Last 4 digits of account number	0010	\$ 2,250.00
	Priority Creditor's Name		Opened 7/01/14 Last	
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Active 11/30/15	

Official Form 106 E/F

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	Number Street City State Zlp Code	As of the date you file, th					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	_ cogo					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY u	nsecure	d claim:			
	☐ Check if this claim is for a community debt	Student loans					
	Is the claim subject to offset?	Obligations arising out		aration agreement or divorce that you did			
	■ No	Debts to pension or pro	ofit-sharin	g plans, and other similar debts			
	Yes	Other. Specify					
			Educa	ational			
4.15	Fed Loan Servicing	Last 4 digits of account i	number	0005	\$		2,044.00
	Priority Creditor's Name Po Box 69184	When was the debt incur	rred?	Opened 9/01/13 Last Active 11/30/15	-		
	Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, th	ne claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	_ cogo					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY u	nsecure	d claim:			
	☐ Check if this claim is for a community debt	Student loans					
	Is the claim subject to offset?	☐ Obligations arising out not report as priority claim:		aration agreement or divorce that you did			
	■ No	Debts to pension or pro	ofit-sharin	g plans, and other similar debts			
	Yes	☐ Other. Specify	Educa	ational			
4.16	Fed Loan Servicing	Last 4 digits of account i	number	0009	\$		1,978.00
	Priority Creditor's Name Po Box 69184	When was the debt incur	rred?	Opened 6/01/14 Last Active 11/30/15	-		
	Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, the	ne claim i	s: Check all that apply			
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	. ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY u	nsecure	d claim:			
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out not report as priority claim:		aration agreement or divorce that you did			
	■ No	<u> </u>		g plans, and other similar debts			
	Yes	Other. Specify	Educa	ational			
4.17	Fed Loan Servicing	Last 4 digits of account i	number	0006	\$		1,140.00

Priority Creditor's Name

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Debtor 1 Michelle M Safford

	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 10/01/13 Last Active 11/30/15		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify			
			ational		
4.18	Fed Loan Servicing Priority Creditor's Name	Last 4 digits of account number	0008	\$	1,115.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 5/01/14 Last Active 11/30/15		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another				
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	☐ Other. Specify			
		Educational			
4.19	Fed Loan Servicing	Last 4 digits of account number	0003	\$	936.00
	Priority Creditor's Name Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 1/01/13 Last Active 11/30/15		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	□ Haliawidatad			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community debt	Student loans			
	Is the claim subject to offset?	Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		Educa	ational		

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Debto	Michelle M Safford		Case number (if know)	
4.20	Fed Loan Servicing Priority Creditor's Name	Last 4 digits of account number	0002	\$ 5,964.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 11/01/12 Last Active 11/30/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify	ational	
4.21	Fed Loan Servicing Priority Creditor's Name	Last 4 digits of account number	0001	\$ 3,559.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 11/01/12 Last Active 11/30/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify	ational	
4.00	F. II 0 1.1			 0.505.05
4.22	Fed Loan Servicing Priority Creditor's Name	Last 4 digits of account number	0004	\$ 2,565.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 6/01/13 Last Active 11/30/15	

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

4.25	First Premier Bank	Last 4 digits of account number	3854	\$	1,029.00
	Yes	Other. Specify	ge Account		
	■ No	not report as priority claims Debts to pension or profit-shari	· ·		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did		
	☐ Check if this claim is for a community	☐ Student loans			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 only				
	Who incurred the debt? Check one.	☐ Contingent			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	6250 Ridgewood Rd St Cloud, MN 56303	When was the debt incurred?	Opened 8/01/13 Last Active 6/19/15		
4.24	Fingerhut Priority Creditor's Name	Last 4 digits of account number	8082	\$	713.00
	Yes	■ Other. Specify Cred	t Card		
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	☐ Check if this claim is for a community debt	☐ Student loans			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ Debtor 1 only	☐ Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent			
	Number Street City State Zlp Code	As of the date you file, the claim	is: опеск ан тлат арріу		
	Fifth Third Bank Bankruptcy Department, 1830 E Paris Ave Se Grand Rapids, MI 49546	When was the debt incurred?	Opened 2/01/13 Last Active 10/02/15		
4.23	Fifth Third Bank Priority Creditor's Name	Last 4 digits of account number	4303	\$	372.00
		Educ	ational		
	Yes	Other. Specify	ation al		
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a sep not report as priority claims	aration agreement or divorce that you did		
	☐ Check if this claim is for a community debt	Student loans			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 only				
	Who incurred the debt? Check one.	☐ Contingent	· ,		
Debto	r 1 Michelle M Safford		28 of 68 Case number (if know)	Desc Main	
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Priority Creditor's Name

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Debtor 1 Michelle M Safford

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\$ 0.00
ou did
\$ 64.50
ou did

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Debtor 1 Michelle M Safford Case number (if know) 4.28 668.00 **Ingalls Hospital** Last 4 digits of account number Priority Creditor's Name One Ingalls Drive When was the debt incurred? Harvey, IL 60426 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bill** Other. Specify 4.29 0.00 Loan Express 1284 Last 4 digits of account number \$ Priority Creditor's Name Opened 9/19/11 Last 28 E Jackson #1324 When was the debt incurred? Active 5/31/12 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Notice** Other. Specify 4.30 MertoSouth Medical Center 961.00 Last 4 digits of account number Priority Creditor's Name C/O PASI When was the debt incurred? **PO BOX 188**

As of the date you file, the claim is: Check all that apply

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Brentwood, TN 37024 Number Street City State Zlp Code

	Priority Creditor's Name Certified Services Inc	When was the debt incurred?	Opened 4/01/09		
4.33	Perspectives Ltd	Last 4 digits of account number	0184	\$	0.00
	Yes	Other. Specify	etion		
	■ No	not report as priority claims Debts to pension or profit-sharin	· ·		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did		
	☐ Check if this claim is for a community	☐ Student loans			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 only	□ Conungent			
	Who incurred the debt? Check one.	☐ Contingent			
	Atlanta, GA 30353 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Priority Creditor's Name P.O. Box 105997	When was the debt incurred?		*	
4.32	Montgomery Ward	Last 4 digits of account number		\$	38.95
	Yes	Other. Specify	etion		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	☐ Check if this claim is for a community debt	☐ Student loans			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 only				
	Who incurred the debt? Check one.	☐ Contingent			
	Dallas, TX 75266 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Priority Creditor's Name PO BOX 660827	When was the debt incurred?			
4.31	Midwest Emergency Physicians	Last 4 digits of account number		\$	63.00
	☐ Yes	Other. Specify Collect	ction		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Is the claim subject to offset?	Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	☐ Check if this claim is for a community debt	☐ Student loans			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Contingent			
Debto	n 1 Michelle M Safford	——————————————————————————————————————	Case number (if know)		
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Po Box 177
Waukegan, IL 60079
Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

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Debtor	Michelle M Safford	——————	Case number (if know)	
	Who incurred the debt? Check one.	По :: .		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	_			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecu	red claim:	
	At least one of the debtors and another		ed claim.	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a senot report as priority claims	paration agreement or divorce that you did	
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts	
	Yes	Other. Specify	ce	
4.34	Pronger Smith Clinic	Last 4 digits of account numbe	r 0809	\$ 85.00
	Priority Creditor's Name		0	
	Cda/pontiac Po Box 213	When was the debt incurred?	Opened 6/01/15	
	Streator, IL 61364 Number Street City State Zlp Code	As of the date you file, the clair	n is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a senot report as priority claims	paration agreement or divorce that you did	
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts	
	Yes	Other. Specify	ection	
4.35	Pronger Smith Medical Care	Last 4 digits of account numbe	r	\$ 85.00
	Priority Creditor's Name	· ·		
	PO BOX 789 Tinley Park, IL 60477	When was the debt incurred?		
Number Street City State Zlp Code		As of the date you file, the claim	n is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a senot report as priority claims	paration agreement or divorce that you did	
	No	Debts to pension or profit-sha	ring plans, and other similar debts	
	Yes	Other. Specify	lical	

4.36 Sullivan Urgent Aid Centers
Priority Creditor's Name

Last 4 digits of account number

6538

496.00

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Debto	Michelle M Safford		Case number (if know)		
	Ars 1801 Nw 66th Ave	When was the debt incurred?			
	Fort Lauderdal, FL 33313 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	L Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing			
	☐Yes	■ Other. Specify Collection	ction		
4.37	Surety Finance Priority Creditor's Name	Last 4 digits of account number	6699	\$	0.00
	3414 W 79th Chicago, IL 60652	When was the debt incurred?	Opened 12/24/10 Last Active 4/22/11		
	Number Street City State Zlp Code				
	Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify	9		
4.38	Torrence Tower Apartments	Last 4 digits of account number	52D1	\$	0.00
	Priority Creditor's Name Rent Recover Llc 729 N Rt 83 Ste 32	When was the debt incurred?	Opened 7/01/11		
	Bensenville, IL 60106 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	_			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	not report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Notice	e		

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Debtor 1 Michelle M Safford Case number (if know) 4.39 176.00 **University Account Service** Last 4 digits of account number Priority Creditor's Name **General Post Office** When was the debt incurred? P.O. BOX 5866 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Student Loan Other. Specify 4.40 0.00 **Us Cellular** 2006 Last 4 digits of account number \$ Priority Creditor's Name **Debt Recovery Solution** When was the debt incurred? Opened 12/01/12 900 Merchants Concourse Ste **LI11** Westbury, NY 11590 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Notice** Other. Specify 4.41 Village Of Lynwood Rs 6582 0.00 Last 4 digits of account number \$ Priority Creditor's Name When was the debt incurred? **MCSI - Municipal Collection** Services 7330 College Dr, Suite 108 Palo Heights, IL 60463

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

Debto	r 1 Michelle M Safford	Document Page	2 35 0T 68 Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	G Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepnot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-shar	ng plans, and other similar debts		
	Yes	Other. Specify	e		
4.42	Village Of Riverdale	Last 4 digits of account number	2665	\$	0.00
	Priority Creditor's Name MCSI -Municipal Collection Services 7330 College Dr, Suite 108	When was the debt incurred?			
	Palo Heights, IL 60463 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	□ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep	paration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-shar	ng plans, and other similar debts		
	Yes	Other. Specify Notice	ee		
trying more	List Others to Be Notified About a D his page only if you have others to be notified a g to collect from you for a debt you owe to some than one creditor for any of the debts that you lebts in Parts 1 or 2, do not fill out or submit th	about your bankruptcy, for a debt tha neone else, list the original creditor in I listed in Parts 1 or 2, list the addition	Parts 1 or 2, then list the collection agency	/ here. Similarly, if	you have
Name	e Address	On which entry in Part 1 or	Part2 did you list the original cre	ditor?	
	ld Scott Harris	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority U		
Suite	V. Jackson Blvd 600 ago, IL 60604		■ Part 2: Creditors with Nonprior	ty Unsecured (Claims
011100	.go, in 0000+	Last 4 digits of account nu	mber		
CBC	e Address S Box 69	On which entry in Part 1 or Line 4.28 of (Check one):	Part2 did you list the original cre ☐ Part 1: Creditors with Priority U	Insecured Clair	
	mbus, OH 43216		■ Part 2: Creditors with Nonprior	ty Unsecured (Claims
		Last 4 digits of account nu	mber		
CBE Paym P.O. I	e Address Group Hent Processing Center Box 3136 Dukoo WI 53201	On which entry in Part 1 or Line 4.7 of (Check one):	Part2 did you list the original cre ☐ Part 1: Creditors with Priority U ■ Part 2: Creditors with Nonpriori	Insecured Clair	
WIIIW	aukee, WI 53201	Last 4 digits of account nu	mber		
Name	e Address	On which entry in Part 1 or	Part2 did you list the original cre	ditor?	

Official Form 106 E/F

Case 15-42901 Doc 1 Filed 12/21/15 Entered 12/21/15 16:54:07 Desc Main Document Page 36 of 68 Debtor 1 Michelle M Safford Case number (if know) **IRS** Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims 230 S. Dearborn ☐ Part 2: Creditors with Nonpriority Unsecured Claims Stop 5016-CHI Chicago, IL 60604 Last 4 digits of account number Name Address On which entry in Part 1 or Part2 did you list the original creditor? **IRS** Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims **Department of the Treasury** ☐ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 21126 Philadelphia, PA 19114 Last 4 digits of account number Name Address On which entry in Part 1 or Part2 did you list the original creditor? **Premiere Bank Card** Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 2208 ■ Part 2: Creditors with Nonpriority Unsecured Claims Vacaville, CA 95696 Last 4 digits of account number Name Address On which entry in Part 1 or Part2 did you list the original creditor? U.S. Attorneys office Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims 219 S. Dearborn St. 5th floor ☐ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	170.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	170.00
				Total Claim	
	6f.	Student loans	6f.	\$	24,844.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	13,292.45
	6j.	Total. Add lines 6f through 6i.	6j.	\$	38,136.45

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Fill in this infor	mation to identify your	case:		
Debtor 1	Michelle M Saffor	·d		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
	Robert Rita 2355 York St. #2 Blue Island, IL 60406	Residential Lease

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Fill in this	s information to identify you	Documei	nt Page 38 (of 68	
Debtor 1	Michelle M Saffe				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber			☐ Check if this is an amended filing	
	l Form 106H Iule H: Your Co	debtors		12/15	
people are fill it out, a your name	filing together, both are ed	qually responsible for supp ne boxes on the left. Attach n). Answer every question.	lying correct informa the Additional Page	as complete and accurate as possible. If two married ation. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write se as a codebtor.	
■ No		. ,			
	hin the last 8 years, have yo na, California, Idaho, Louisian			ory? (Community property states and territories include shington, and Wisconsin.)	
	Go to line 3. s. Did your spouse, former sp	ouse, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only	y if that person is a guarant	or or cosigner. Make	or if your spouse is filing with you. List the person sho e sure you have listed the creditor on Schedule D (Offic 106G). Use Schedule D, Schedule E/F, or Schedule G to	cial
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the debrached all schedules that apply:	t
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				□ Sahadula D. lina	_
	Name			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your	case:							
	otor 1 Michelle M								
	otor 2				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS						
(If kr	fficial Form 106I		-				nded filing ement showine as of the	ing postpetition following date:	
S	chedule I: Your Inc	ome							12/15
sup spo atta Par	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. The describe Employment	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is livir matio	ng with you, i n about your	nclude info spouse. If r	ormation abou more space is	it your needed,
1.	Fill in your employment information.		Debtor 1			Debto	or 2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				nployed t employed		
	employers.	Occupation	Administrative A	Administrative Assistant					
	Include part-time, seasonal, or self-employed work.	Employer's name	Amtrak						
	Occupation may include student or homemaker, if it applies.	Employer's address	40 Massachuse Washington, DC						
		How long employed t	here? <u>7 years</u>						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to r	eport for	any lir	ne, write \$0 in	the space. I	nclude your no	on-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	employ	ers for that p	erson on the	lines below. If	you need
					F	For Debtor 1		ebtor 2 or lling spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$_	4,404.5	1 \$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$_	0.0	o _ +\$	N/A	
4	Calculate gross Income Add I	ine 2 + line 3		4	\$	4 404 51	\$	N/Δ	

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Deb	tor 1	Michelle M Safford		Case	number (if known)			
				For	Debtor 1		otor 2 or ng spouse	
	Cop	y line 4 here	4.	\$	4,404.51	\$	N/A	
5.	Lict	all payroll deductions:						
Э.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	4 047 24	\$	NI/A	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	\$ 	1,017.34 0.00	\$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$ 	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	41.12	\$	N/A	
	5e.	Insurance	5e.	\$-	251.44	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+		0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	1,309.90	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,094.61	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$\$ \$\$ \$\$	N/A N/A N/A N/A	
	8g.	Pension or retirement income	– 8g.	\$-	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$		+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	3	3,094.61 + \$	ı	1/A = \$	3,094.61
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depen			sted in <i>Sch</i>	<i>edule J.</i> 11. + \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes				ta. if it		3,094.61
13.		you expect an increase or decrease within the year after you file this form.	?				Combin monthly	ed income
		Yes. Explain:						

page 2

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Fill	in this informa	ition to identify yo	our case:						
	otor 1	Michelle M S				-		if this is:	
	otor 2 ouse, if filing)						-] A:		wing postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the:	NORTH	ERN DISTRICT OF II	LLINOIS		M	M / DD / YYYY	
Cas	se number					-			
(If k	nown)								
0	fficial Fo	rm 106J							
S	chedule	J: Your I	Exper	ses					12/1
info	ormation. If m		eded, atta	ch another sheet to					or supplying correct your name and case
Par		ibe Your House	hold						
1.	Is this a joir								
	☐ Yes. Doe	s Debtor 2 live i	n a separ	ate household?					
	□ N		st file Offic	al Form 106J-2, <i>Expe</i>	enses for Separate H	lousehold of	Debto	r 2.	
2.	Do you have	e dependents?	□ No						
	Do not list Do and Debtor 2		■ Yes.	Fill out this information f each dependent	•		_	Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter			19	□ No ■ Yes
	acpendents	namos.			<u> </u>				□ No
									☐ Yes ☐ No
									☐ Yes
									□ No □ Yes
3.	expenses of	enses include f people other tl d your depende	nan $_{\square}$	No Yes					
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses					
exp									apter 13 case to report of the form and fill in the
the	value of sucl	h assistance and		government assistar cluded it on <i>Schedul</i>				Your exp	onsos
(Of	ficial Form 10	161.)					_	Tour exp	
4.		or home owners and any rent for the		ses for your residen r lot.	ce. Include first mort	tgage 4	. \$ _		775.00
	If not includ	led in line 4:							
		estate taxes					. \$		0.00
		rty, homeowner's maintenance, re		's insurance upkeep expenses			. \$. \$		0.00
_	4d. Home	owner's associat	ion or con	dominium dues	a hama agodini ta	4d	. \$		0.00
5.	Additional n	ποιτgage payme	ents for yo	our residence, such a	is nome equity loans	5	. \$		0.00

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Deb	otor 1	Michelle	M Safford		Case numl	ber (if known)	
6.	Utiliti	iec.					
0.	6a.		heat, natural gas		6a.	\$	220.00
	6b.	-	wer, garbage collection		6b.	·	0.00
	6c.		e, cell phone, Internet, satellite, a	nd cable convices	6c.	·	290.00
	6d.	Other. Spe		nd cable services	6d.	*	
7						\$	0.00
7.			ekeeping supplies hildren's education costs		7.	*	400.00
8.					8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	125.00
			roducts and services		10.	·	75.00
			ntal expenses		11.	\$	65.00
12.			Include gas, maintenance, bus of	or train fare.	12.	\$	385.00
12			ar payments.	magazines and books	13.		
			clubs, recreation, newspapers,	_			100.00
			ributions and religious donatio	ons	14.	\$	0.00
15.	Insur		auranaa daduatad fram vaur nav	or included in lines 4 or 20			
		ot include in Life insura	surance deducted from your pay	or included in lines 4 or 20.	15a.	¢	0.00
					15a. 15b.	·	0.00
		Health ins				·	0.00
		Vehicle in			15c.	·	88.00
			rance. Specify:		15d.	\$	0.00
16.			clude taxes deducted from your p	pay or included in lines 4 or 20.	40	•	0.00
4-7	Spec				16.	\$	0.00
17.			ease payments:		170	¢	0.00
			ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe			17c.	·	0.00
		Other. Spe			17d.	\$	0.00
18.				support that you did not report a		¢	0.00
40				Your Income (Official Form 106I)). 10.	·	
19.			you make to support others w	vno do not live with you.	40	\$	0.00
20	Spec	,		lines A on F of this forms on an Co	19.	- · · · · · · · · · · · · · · · · · · ·	
20.				lines 4 or 5 of this form or on Sca			0.00
			on other property		20a.		0.00
		Real estat			20b.	·	0.00
			nomeowner's, or renter's insuranc		20c.	·	0.00
			ce, repair, and upkeep expenses		20d.	·	0.00
	20e.	Homeown	er's association or condominium	dues	20e.		0.00
21.	Othe	r: Specify:			21.	+\$	0.00
22	Color	uloto vour i	monthly expenses				
22.		-	through 21.			¢	2 522 00
			3	C) if any from Official Form 106 L		\$	2,523.00
			` '	2), if any, from Official Form 106J-2	2	D	
	22c. /	Add line 22	a and 22b. The result is your mo	onthly expenses.		\$	2,523.00
23	Calc	ulate vour	monthly net income.				
20.			12 (your combined monthly incon	ne) from Schedule I	23a.	\$	3,094.61
			monthly expenses from line 22c	,	23b.	*	2,523.00
	۷۵۵.	Copy your	monthly expenses non line 220	above.	۷۵۵.	Ψ	2,523.00
	23c	Subtract v	our monthly expenses from your	monthly income			
	200.		is your <i>monthly net income</i> .	monthly moonic.	23c.	\$	571.61
		THE TESUIT	io your monding not moonio.			L	
24.	Do vo	ou expect a	an increase or decrease in vour	r expenses within the year after y	you file this	form?	
	For ex	kample, do yo	u expect to finish paying for your car lo	pan within the year or do you expect your			or decrease because of a
			terms of your mortgage?				
	■ No	0.					
	□Y€		Explain here:				

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Fill in this in	nformation to identify your	case:			
Debtor 1	Michelle M Saffor	d			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				
(if known)					Check if this is an amended filing
Official F	orm 106Dec				
Declar	ation About a	n Individual	Debtor's S	Schedules	12/15
If two marrie	ed people are filing togethe	r, both are equally respo	nsible for supplying	correct information.	
obtaining me		n connection with a bank			tement, concealing property, or 00, or imprisonment for up to 20
	Sign Below				
Did you	u pay or agree to pay some	one who is NOT an attor	ney to help you fill o	out bankruptcy forms?	
•	No				
	Yes. Name of person			. Attach <i>Bankruptcy Petiti</i> and <i>Signature</i> (Official Fo	ion Preparer's Notice, Declaration, orm 119).
	penalty of perjury, I declare by are true and correct.	that I have read the sum	mary and schedules	filed with this declarati	ion and

Signature of Debtor 2

Date

X /s/ Michelle M Safford

Michelle M Safford Signature of Debtor 1

Date December 9, 2015

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		mation to identify you				
De	ebtor 1	Michelle M Saff	ord Middle Name	Last Name		
1	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Ba	nkruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Ca	ase number					
(if I	known)					☐ Check if this is an
						amended filing
_	<i></i>					
	fficial Fo				_	
St	atement	of Financial	Affairs for Indivi	iduals Filing for	Bankruptcy	12/1
				e are filing together, both		
		n). Answer every que		to this form. On the top of	any additional pages, wr	ite your name and case
Pa	rt 1: Give [Details About Your M	arital Status and Where Y	ou Lived Before		
				<u> </u>		
1.	What is you	r current marital stat	us?			
	Married					
	☐ Not mai	rried				
2.	During the I	ast 3 years, have you	lived anywhere other tha	n where you live now?		
	□ No					
	Yes. Lis	st all of the places you	lived in the last 3 years. Do	not include where you live	now.	
	Debtor 1 Pr	rior Address:	Dates Debtor	1 Debtor 2 Prior	Address:	Dates Debtor 2
	Debior 111	ioi Addiess.	lived there	Design 2 1 nor	Addi 000.	lived there
	Current		From-To: 1 year	☐ Same as Debt	or 1	☐ Same as Debtor 1 From-To:
			. , .			. 16 16.
	1914 Verm	nont Apt 5	From-To:	☐ Same as Debt	or 1	☐ Same as Debtor 1
	Blue Islan		3 years	Game as Debt	01 1	From-To:
3. sta				legal equivalent in a com n Nevada, New Mexico, Puerto		erritory? (Community propert and Wisconsin.)
	_	,	,		- · · · · · · · · · · · · · · · · · · ·	,,
	■ No □ Yes. Ma	aka aura vau fill aut Ca	shadula II. Vaux Cadabtara	(Official Form 10011)		
	Tes. IVIa	ake sure you iiii out Sc	chedule H: Your Codebtors	Official Form 106H).		
Pa	rt 2 Explai	in the Sources of You	ur Income			
4.	Did you hav	e any income from e	mployment or from opera	ting a business during this	s year or the two previous	s calendar vears?
٠.	Fill in the tota	al amount of income y	ou received from all jobs an	d all businesses, including p	part-time activities.	s calcilual years:
	If you are filir	ng a joint case and you	u have income that you rece	eive together, list it only once	e under Debtor 1.	
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

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Debtor 1 Michelle M Safford Page 45 of 68
Case number (if known)

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		y 1 of curre filed for bar	nt year until nkruptcy:	■ Wages, commissions, bonuses, tips		\$52,854.08	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	last caler nuary 1 to	ndar year: December	31, 2014)	■ Wages, commissions, bonuses, tips		\$48,743.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$46,946.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	gambling List each	and lottery v	vinnings. If yo	nefit payments; pensions; rer u are filing a joint case and yo ome from each source separa	ou have	e income that you rec	eived together, list	t it only once	
				Debtor 1	C==	in	Debtor 2		Gross income
				Sources of income Describe below	(befo	ss income ore deductions and usions)	Sources of inc Describe below		(before deductions and exclusions)
Par	t 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankrı	ıptcy			
6.	Are either ☐ No.	Neither Deindividual puring the No.	ebtor 1 nor Dorimarily for a 90 days befor Go to line 7		i mer d eld purpe d you p	ebts. Consumer debt ose." oay any creditor a tota	al of \$6,225* or mo	ore?	
			not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for th t on 4/01/16 and every 3 years	its for c nis ban	iomestic support obliç kruptcy case.	gations, such as c	niid support a	and alimony. Also, do
	■ Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more	?	
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pai ments for domestic support ol for this bankruptcy case.					
	Creditor	's Name and	d Address	Dates of payme	nt	Total amount paid	Amount you still owe	Was this p	payment for

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Document Page 46 of 68 Debtor 1 Michelle M Safford Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened **Credit Acceptance** 2002 Jaguar \$0.00 P.O. Box 5070 Southfield, MI 48086-5070 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Nο

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Document Page 47 of 68 Debtor 1 Michelle M Safford Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No ☐ Yes. Fill in the details. Describe the property you lost and Date of your Describe any insurance coverage for the loss Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details.

Person Who Was Paid

Address

Description and value of any property

transferred

Amount of

payment

Date payment

made

or transfer was

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.										
	Person Who Received Transfer Address	Description and v		payme	be any property or ints received or debts	Date transfer was made					
	Person's relationship to you			paid ii	exchange						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a	self-settle	d trust or similar device	of which you are a					
	☐ Yes. Fill in the details.										
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made					
Par	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Unit	s						
20	Within 1 year before you filed for bankrunte	v were any financial ac	counts or instr	umente he	ld in your name, or for y	our benefit closed					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.										
	■ No										
	Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account or account number instrument			Date account was closed, sold, moved, or transferred	Last balance before closing o transfe					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?					
22.	Have you stored property in a storage unit o	or place other than your	home within 1	year befor	e you filed for bankrupt	ссу					
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Control	for Someone Else									
	Do you hold or control any property that sor for someone.		ude any proper	ty you borr	owed from, are storing	for, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property	Value					
	rt 10: Give Details About Environmental Info										

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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Debtor 1 Michelle M Safford

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	IIaza	dous material, polititant, contaminant,	or similar term.							
Rep	ort all	notices, releases, and proceedings that	at you know about, regardless of who	en the	ey occurred.					
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	_	No Yes. Fill in the details.								
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?									
	_	No Yes. Fill in the details.								
		re of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice				
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any en	viron	mental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.									
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)			Status of the case				
Par	t 11:	Give Details About Your Business or	Connections to Any Business							
27.	Withi	n 4 years before you filed for bankrupt	cy, did you own a business or have a	any o	f the following connections to any	/ business?				
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership								
		☐ An officer, director, or managing ex	ecutive of a corporation							
		☐ An owner of at least 5% of the voting	g or equity securities of a corporatio	n						
		No. None of the above applies. Go to F	Part 12.							
		Yes. Check all that apply above and fill	in the details below for each busine	SS.						
		iness Name	Describe the nature of the business	3	Employer Identification number					
	Add (Num	ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or IIIN.				
28.	Withi	n 2 years before you filed for bankrupt	cv. did vou give a financial statemen	t to a	Dates business existed nvone about your business? Inclu	ude all financial				
		utions, creditors, or other parties.	-,, , g		· • • • • • • • • • • • • • • • • • • •					
	■ No □ Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)									

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Mi	ichelle M Safford	
Michelle M Safford		Signature of Debtor 2
Signa	ture of Debtor 1	
Date	December 9, 2015	Date
Did yo □ No □ Yes		r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did yo	u pay or agree to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?
□ No		
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

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Debtor 1 Michelle M Safford

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 9, 2015 Signature /s/ Michelle M Safford Michelle M Safford Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Any Funds received before filling shall be used for payment of court costs, filing fees,

Any Funds received before filling shall be used for payment of court costs, filing fees, credit reports, credit counseling, postage, paper, copying and other related overhead costs.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$358.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	
Signed:	
/s/ Michelle M Safford	/s/ Kerrie S. Neal
Michelle M Safford	Kerrie S. Neal 6270224
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amou	unts are blank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Michelle M Safford		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENS	SATION OF ATTORY	NEY FOR DE	CBTOR(S)	
1.	. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	4,000.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person ur	aless they are members	bers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.				
6.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspects of	of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 				
	Outside counsel may be employed under	firm supervision, and paid	by our firm.		
7.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl	oes not include the following so hargeability actions or any	ervice: other adversary	/ proceeding.	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for pa	nyment to me for re	presentation of the debtor(s) in	
ı	December 9, 2015	/s/ Kerrie S. Neal			
Date Kerrie S. Neal 6270224					
		Signature of Attorney Zalutsky & Pinski, I	Ltd.		
		111 W. Washington			
		Suite 1550			
		Chicago, IL 60602 312-782-9792 Fax:	312-782-0483		
		admin@ZAPLawFir			

Name of law firm

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United States Bankruptcy Court Northern District of Illinois

In re	Michelle M Safford		Case No.		
		Debtor(s)	Chapter 13		
	VE	RIFICATION OF CREDITOR M	ATRIX		
	Number of Creditors: 44				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	December 9, 2015	/s/ Michelle M Safford Michelle M Safford Signature of Debtor			

Acs/barclays Bank Plc 745 Seventh Avanue New York, NY 10019

Amerimark Premier 1515 S 21st St Clinton, IA 52732

Arnold Scott Harris 111 W. Jackson Blvd Suite 600 Chicago, IL 60604

Blue Island Clinic Company LLC PO BOX 14000 Belfast, ME 04915

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CBCS P.O. Box 69 Columbus, OH 43216

CBE Group
Payment Processing Center
P.O. Box 3136
Milwaukee, WI 53201

City Of Calumet City Municollofam 3348 Ridge Road Lansing, IL 60438

City of Chicago Department of Revenue 121 N. LaSalle St. Rm. 107A Chicago, IL 60602

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181 Comenity Bank/Value City Furniture Po Box 182125 Columbus, OH 43218

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Dentalworks Inc Cds/Escallate LLC 5200 Stoneham Rd Ste 200 North Canton, OH 44720

Devry Inc Attention: Student Accounts Center 814 Commerce Drive Oakbrook, IL 60523

Devry University 814 Commerce Dr. Oak Brook, IL 60523

Fed Loan Servicing Po Box 69184 Harrisburg, PA 17106

Fifth Third Bank Fifth Third Bank Bankruptcy Department, 1830 E Paris Ave Se Grand Rapids, MI 49546

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

First Premier Bank 601 S Minneapolis Ave Sioux Falls, SD 57104

Go Financial 7465 E Hampton Ave. Mesa, AZ 85209 Go Financial Po Box 53087 Phoenix, AZ 85072

Honor Finance 1731 Central St Evanston, IL 60201

Illinois Tollways 2700 Ogden Ave. Downers Grove, IL 60515

Ingalls Hospital One Ingalls Drive Harvey, IL 60426

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

IRS 230 S. Dearborn Stop 5016-CHI Chicago, IL 60604

IRS
Department of the Treasury
P.O. Box 21126
Philadelphia, PA 19114

Loan Express 28 E Jackson #1324 Chicago, IL 60604

MertoSouth Medical Center C/O PASI PO BOX 188 Brentwood, TN 37024

Midwest Emergency Physicians PO BOX 660827 Dallas, TX 75266 Montgomery Ward P.O. Box 105997 Atlanta, GA 30353

Perspectives Ltd Certified Services Inc Po Box 177 Waukegan, IL 60079

Premiere Bank Card PO Box 2208 Vacaville, CA 95696

Pronger Smith Clinic Cda/pontiac Po Box 213 Streator, IL 61364

Pronger Smith Medical Care PO BOX 789
Tinley Park, IL 60477

Robert Rita 2355 York St. #2 Blue Island, IL 60406

Sullivan Urgent Aid Centers Ars 1801 Nw 66th Ave Fort Lauderdal, FL 33313

Surety Finance 3414 W 79th Chicago, IL 60652

Torrence Tower Apartments Rent Recover Llc 729 N Rt 83 Ste 32 Bensenville, IL 60106

U.S. Attorneys office 219 S. Dearborn St. 5th floor Chicago, IL 60604 University Account Service General Post Office P.O. BOX 5866 Carol Stream, IL 60197

Us Cellular Debt Recovery Solution 900 Merchants Concourse Ste L111 Westbury, NY 11590

Village Of Lynwood Rs MCSI -Municipal Collection Services 7330 College Dr, Suite 108 Palo Heights, IL 60463

Village Of Riverdale MCSI -Municipal Collection Services 7330 College Dr, Suite 108 Palo Heights, IL 60463